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Application Number	File No.	Applicant's Name	Applicant's Address
3/2/2004	707 824-4634	CLAIRVOYANT, Inc.	1000 10th St, Suite 100, San Francisco, CA 94103
Examiner Name	Examiner Phone	Examiner Fax	Examiner Email
3/2/2004	707 824-4634		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Name of Individual: <u>Shant P. Kulkarni</u> Signature: <u>[Signature]</u> Date: <u>3/2/2004</u>	

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